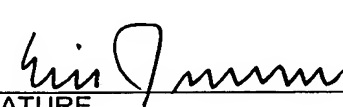
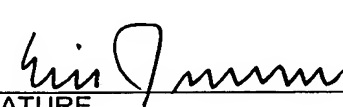
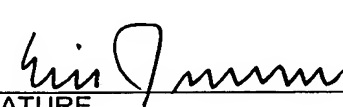


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|--|---|---|
| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | Attorney Docket No. 1501-1289 U.S. Application No. 107518518 |
| INTERNATIONAL APPLN. NO. PCT/SE2003/001048 | INTERNATIONAL FILING DATE June 19, 2003 | PRIORITY DATE CLAIMED June 19, 2002 |
| TITLE OF INVENTION: ROTATION BODY ARRANGEMENT | | |
| APPLICANT(S) FOR DO/EO/US: Martin SANDGREN | | |
| Applicant herewith submits to the United States Designated Elected Office (DO/EO/US) the following items and other information: | | |
| <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. 3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below. 4. <input checked="" type="checkbox"/> The US has been elected (Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2)) <ol style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> has been communicated by the International Bureau. See attached PCT/IB/308. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). 6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)) <ol style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). 7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)) <ol style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made, however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)). 9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4) 10. <input type="checkbox"/> A Declaration of Inventorship for purposes of U.S.A. designation pursuant to rule 4.17(iv).) 11. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). <p>Items 11 to 20 below concern document(s) or information included:</p> <ol style="list-style-type: none"> 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) w/PTO-1449 - <input type="checkbox"/> Copy of IDS citations. 13. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)). 14. <input checked="" type="checkbox"/> A preliminary amendment. 15. <input checked="" type="checkbox"/> An Application Data Sheet under 37 C.F.R. 1.76. 16. <input checked="" type="checkbox"/> Itemized Return Receipt Postcard 17. <input type="checkbox"/> A substitute specification. 18. <input type="checkbox"/> Power of Attorney and Statement under 37 CFR §3.73(b) <ol style="list-style-type: none"> a. <input type="checkbox"/> Newly executed Power of Attorney b. <input type="checkbox"/> A change of Power of Attorney and/or change of address letter. 19. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825. 20. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4). 21. <input type="checkbox"/> A second copy of the English language translation of the international application (35 U.S.C. 154(d)(4)). 22. <input checked="" type="checkbox"/> Other items or information: <u>International Search Report, Abstract, PCT/IPEA/409 (International Preliminary Examination Report)</u> | | |

| U.S. APPLICATION NO. 10/518518 | | INTERNATIONAL APPLN. NO. PCT/SE2003/001048 | | ATTORNEY DOCKET NO. 1501-1289 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|----------|--|----------|---|--|---------------------------|--------------|--|-----------------|--|--|----------|----------|----------|----------|------|--------|------|--------|--------------------------|----------|--|------|--------|------|--------|---------------------------|----------|--|------|--------|------|--------|--------------------------------|----------|--|---|--|--|--|--|---------|--|--|--|--|--|--|--------|--|---------------|--|--|--|--------------------------------|---------------------|---------------------------|--------|--|--|--|--|--|-----------|--|-----------|--------|--|------------------------------------|--|--|--|--|--|------------|--------|--|--|--|--|--|--|--------|--|--|--|--|--|--|--|--------|--|--|------------------------------|--|--|--|--|-----------------|--|--|--|--|--|--|--|------------------------|----|----------|----|---|--|--|--|--|--|--|--|---|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------------------------------------|--|--|--|
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input checked="" type="checkbox"/> The following fees are submitted: PCT FEES - NATIONAL STAGE | | | | | CALCULATIONS PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="width: 15%;">Large Entity</th> <th colspan="2" style="width: 15%;">Small Entity</th> <th rowspan="2" style="width: 40%;">Fee Description</th> <th rowspan="2" style="width: 15%;"></th> <th rowspan="2" style="width: 15%;"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> <tr> <td>1631</td> <td>300.00</td> <td>2631</td> <td>150.00</td> <td>Basic National Stage Fee</td> <td>\$150.00</td> <td></td> </tr> <tr> <td>1632</td> <td>500.00</td> <td>2632</td> <td>250.00</td> <td>National Stage Search Fee</td> <td>\$250.00</td> <td></td> </tr> <tr> <td>1633</td> <td>200.00</td> <td>2633</td> <td>100.00</td> <td>National Stage Examination Fee</td> <td>\$100.00</td> <td></td> </tr> <tr> <td colspan="5">Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617)</td> <td>\$65.00</td> <td></td> </tr> <tr> <td colspan="2" style="padding: 5px;"> SIZE FEE Plant size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681 </td> <td colspan="2" style="text-align: center; padding: 5px;"> Additional Sheets 10 - 100 = <u>50</u> = <u> </u> X </td> <td style="padding: 5px;"> Fee From Below \$250.00 </td> <td style="text-align: center; padding: 5px;">\$0.00</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: center; padding: 5px;">CLAIMS</td> <td style="padding: 5px;"> NUMBER FILED 1 - 3 = </td> <td style="padding: 5px;"> NUMBER EXTRA </td> <td style="padding: 5px;"> RATE x \$200.00 </td> <td style="text-align: center; padding: 5px;">\$0.00</td> <td></td> </tr> <tr> <td colspan="4" style="padding: 5px;">Independent Claims Fee Codes 1614 / 2614</td> <td style="padding: 5px;">16 - 20 =</td> <td></td> <td style="padding: 5px;">x \$50.00</td> <td style="text-align: center; padding: 5px;">\$0.00</td> <td></td> </tr> <tr> <td colspan="4" style="padding: 5px;">Total Claims Fee Codes 1615 / 2615</td> <td colspan="2" style="padding: 5px;">MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616</td> <td style="padding: 5px;">+ \$360.00</td> <td style="text-align: center; padding: 5px;">\$0.00</td> <td></td> </tr> <tr> <td colspan="5" style="padding: 5px;">Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). Fee Code 1618</td> <td style="text-align: center; padding: 5px;">\$0.00</td> <td></td> <td></td> </tr> <tr> <td colspan="5" style="padding: 5px;">Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property +</td> <td style="text-align: center; padding: 5px;">\$0.00</td> <td></td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right; padding: 5px;">TOTAL FEES ENCLOSED =</td> <td style="text-align: center; padding: 5px;">\$500.00</td> <td></td> <td></td> </tr> <tr> <td colspan="5" rowspan="2"></td> <td style="padding: 5px;">Amount to be refunded:</td> <td style="text-align: center; padding: 5px;">\$</td> </tr> <tr> <td style="padding: 5px;">Charged:</td> <td style="text-align: center; padding: 5px;">\$</td> </tr> <tr> <td colspan="8" style="padding: 10px;"> <input checked="" type="checkbox"/> A check in the amount of \$500.00 to cover the above fees is attached. <input type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fee required under 37 C.F.R. §§ 1.16 or 1.17. </td> </tr> <tr> <td colspan="4" style="padding: 10px;"> SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON 745 South 23rd Street Arlington, VA 22202 Telephone: (703) 521-2297 Facsimile: (703) 685-0573 </td> <td colspan="4" style="padding: 10px; text-align: center;">  _____ SIGNATURE </td> </tr> <tr> <td colspan="4" style="padding: 10px;"> Y&T Customer No. 00466 EJ/yr </td> <td colspan="4" style="padding: 10px; text-align: center;"> Eric Jensen, Reg. No. 37,855 _____ NAME, REGISTRATION NUMBER </td> </tr> <tr> <td colspan="4" style="padding: 10px;"></td> <td colspan="4" style="padding: 10px; text-align: center;"> December 20, 2004 _____ DATE </td> </tr> </table> | | | | | Large Entity | | Small Entity | | Fee Description | | | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1631 | 300.00 | 2631 | 150.00 | Basic National Stage Fee | \$150.00 | | 1632 | 500.00 | 2632 | 250.00 | National Stage Search Fee | \$250.00 | | 1633 | 200.00 | 2633 | 100.00 | National Stage Examination Fee | \$100.00 | | Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617) | | | | | \$65.00 | | SIZE FEE Plant size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681 | | Additional Sheets 10 - 100 = <u>50</u> = <u> </u> X | | Fee From Below \$250.00 | \$0.00 | | CLAIMS | | | | NUMBER FILED 1 - 3 = | NUMBER EXTRA | RATE x \$200.00 | \$0.00 | | Independent Claims Fee Codes 1614 / 2614 | | | | 16 - 20 = | | x \$50.00 | \$0.00 | | Total Claims Fee Codes 1615 / 2615 | | | | MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 | | + \$360.00 | \$0.00 | | Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). Fee Code 1618 | | | | | \$0.00 | | | Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property + | | | | | \$0.00 | | | TOTAL FEES ENCLOSED = | | | | | \$500.00 | | | | | | | | Amount to be refunded: | \$ | Charged: | \$ | <input checked="" type="checkbox"/> A check in the amount of \$500.00 to cover the above fees is attached. <input type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. 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| Large Entity | | Small Entity | | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1631 | 300.00 | 2631 | 150.00 | Basic National Stage Fee | \$150.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1632 | 500.00 | 2632 | 250.00 | National Stage Search Fee | \$250.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1633 | 200.00 | 2633 | 100.00 | National Stage Examination Fee | \$100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617) | | | | | \$65.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIZE FEE Plant size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681 | | Additional Sheets 10 - 100 = <u>50</u> = <u> </u> X | | Fee From Below \$250.00 | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CLAIMS | | | | NUMBER FILED 1 - 3 = | NUMBER EXTRA | RATE x \$200.00 | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims Fee Codes 1614 / 2614 | | | | 16 - 20 = | | x \$50.00 | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims Fee Codes 1615 / 2615 | | | | MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 | | + \$360.00 | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) \$40.00 per property + | | | | | \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEES ENCLOSED = | | | | | \$500.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | Amount to be refunded: | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | Charged: | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON 745 South 23 rd Street Arlington, VA 22202 Telephone: (703) 521-2297 Facsimile: (703) 685-0573 | | | |  _____ SIGNATURE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Y&T Customer No. 00466 EJ/yr | | | | Eric Jensen, Reg. No. 37,855 _____ NAME, REGISTRATION NUMBER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | December 20, 2004 _____ DATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |